

# CAMPAIGN TREASURER'S REPORT SUMMARY

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2015 JUN 10 PM 3:58

CITY OF KEY WEST  
KEY WEST, FLORIDA

(1) ROBERT L. O'NEIL II  
Name

(2) 1401 TRUMAN AVE  
Address (number and street)

KEY WEST, FLORIDA 33040  
City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):

☒ Candidate Office Sought: \_\_\_\_\_

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

## (5) Report Identifiers

Cover Period: From 5/1/15 To 5/31/15 Report Type: M5

☒ Original

☐ Amendment

☐ Special Election Report

## (6) Contributions This Report

Cash & Checks \$ \_\_\_\_\_

Loans \$ \_\_\_\_\_ 800

Total Monetary \$ \_\_\_\_\_ 800

In-Kind \$ \_\_\_\_\_

## (7) Expenditures This Report

Monetary Expenditures \$ \_\_\_\_\_ 91.01

Transfers to Office Account \$ \_\_\_\_\_ 210.11

Total Monetary \$ \_\_\_\_\_ 7

## (8) Other Distributions

\$ \_\_\_\_\_

## (9) TOTAL Monetary Contributions To Date

\$ \_\_\_\_\_ 922.45

## (10) TOTAL Monetary Expenditures To Date

\$ \_\_\_\_\_ 154.825

## (11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) ROBERT L. O'NEIL II

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X  
Signature [Signature]

(Type name) ROBERT L. O'NEIL II

☒ Candidate ☐ Chairperson (only for PC and PTY)

X  
Signature [Signature]



# CAMPAIGN TREASURER'S REPORT - ITEMIZED CONTRIBUTIONS

(1) Name ROBERT L. O'NEIL II (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 5.1.15 through 5.31.15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle)	(8) Contributor Type	(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number	Street Address & City, State, Zip Code	Occupation				
5.6.15	O'NEIL II ROBERT L 1701 TRUMAN AVE. KUF		LOA			600
5.20.15	33040 " " " O'NEIL II		LOA			200
1 1						
				TOTAL	\$	800
1 1						
1 1						
1 1						
1 1						

TOTAL MONETARY  
 Reports M-23445 1,195  
 1,195



# **CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name ROBERT L. O'NEIL II (2) I.D. Number \_\_\_\_\_  
 (3) Cover Period 5.1.15 through 5.31.15 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
5/7/15	CAT #5 3201 FLACKER AVE NW 33046	SHIRT	CAS		350
5/4/15	ROBERT L O'NEIL II 1401 TRUMAN AVE NW 33046	MISC	CAS		150
5/7/15	CONHTOWN BAR 3340 W. ROOSEVELT AVE NW, FL 33040	DRINK OFF PARTY			511
11		TOTAL			910
11		REPORTS M, 2, 3 & 4 = 689			8725
11		TOTAL			169825
11		REPORTS M, 2, 3, 4 & 5			
11					